

POSITION	INITIALS	ID NO.	DATE
1600 FEE DETERMINATION	ME	68964-6627100	
O.I.P.E. CLASSIFIER		18	6/30/00
FORMALITY REVIEW	ES	200	6/30/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
✗	Allowed	I	Interference
—	(Through numeral)	Canceled	Appeal
:		Restricted	Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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